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CONFIRMATION NO. 2967

<b>SERIAL NUMBER</b> 10/627,589	<b>FILING OR 371(c) DATE</b> 07/25/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 6683.13USC4
<b>APPLICANTS</b> Stephen D. Kuslich, Maplewood, MN; Douglas W. Kohrs, Edina, MN;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/369,614 08/06/1999 PAT 6,599,320 which is a CON of 08/902,746 07/29/1997 ABN which is a DIV of 08/752,818 11/21/1996 PAT 5,947,971 which is a CON of 08/482,025 06/07/1995 PAT 5,720,748 which is a DIV of 08/299,807 09/01/1994 PAT 5,489,307 which is a CON of 08/015,863 02/10/1993 ABN <div style="text-align: right;"><i>OK Jan 8-1-06</i></div>				
<b>** FOREIGN APPLICATIONS *****</b> <i>Note Jan 8-1-06</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b>				
<b>** 11/05/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>[Signature]</i> Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 30
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 43541				
<b>TITLE</b> Laparoscopic spinal stabilization surgical method				
<b>FILING FEE RECEIVED</b> 1080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	